











Postal Regulatory Commission
Submitted 9/30/2011 10:03:12 AM
Filing ID: 76227
Accepted 9/30/2011

ELLISBURG Docket: 1362402 - 13636			
*These are the 1st 18 documents that should be completed Scanned and sent to the MPOO for review			
Page	Document		
1.	Request/approval to study for discontinuance (02/24/2011)	<input checked="" type="checkbox"/>	
2.	Notice (if appropriate) to Headquarters of suspension	<input checked="" type="checkbox"/>	
3.	Notice (if appropriate) to customers/district personnel of suspension	<input checked="" type="checkbox"/>	
4.	Highway map with community highlighted (02/25/2011)	<input checked="" type="checkbox"/>	
5.	Eviction notice (if appropriate) (02/25/2011)	<input checked="" type="checkbox"/>	
6.	Building inspection report and original photos of building deficiencies (if appropriate) (02/25/2011)	<input checked="" type="checkbox"/>	
7.	Post Office and community photos (03/29/2011)	<input checked="" type="checkbox"/>	
8.	PS Form 150, Postmaster Workload Information (03/03/2011)	<input checked="" type="checkbox"/>	
9.	Worksheet for calculating work service credit (02/28/2011)	<input checked="" type="checkbox"/>	
10.	Window transaction record (03/19/2011)	<input checked="" type="checkbox"/>	
11.	Record of incoming mail (03/18/2011)	<input checked="" type="checkbox"/>	
12.	Record of dispatched mail (03/18/2011)	<input checked="" type="checkbox"/>	
13.	Administrative postmaster/OIC comments (03/29/2011)	<input checked="" type="checkbox"/>	
14.	Inspection Service/local law enforcement vandalism reports (02/25/2011)	<input checked="" type="checkbox"/>	
15.	Post Office fact sheet (05/17/2011)	<input checked="" type="checkbox"/>	
16.	Community fact sheet (05/17/2011)	<input checked="" type="checkbox"/>	
17.	Alternate service options/cost analysis (03/30/2011)	<input checked="" type="checkbox"/>	
18.	Form 4920, Post Office Fact Sheet (05/17/2011)	<input checked="" type="checkbox"/>	
19.	Recommendation and Service Replacement Type (04/01/2011)	<input checked="" type="checkbox"/>	
20.	Questionnaire instruction letter to postmaster/OIC (05/05/2011)	<input checked="" type="checkbox"/>	
21.	Cover letter, questionnaire, and enclosures (04/25/2011)	<input checked="" type="checkbox"/>	
22.	Returned customer questionnaires and Postal Service response letters (04/25/2011)	<input checked="" type="checkbox"/>	
23.	Analysis of questionnaires (05/13/2011)	<input checked="" type="checkbox"/>	
24.	Community meeting roster (05/06/2011)	<input checked="" type="checkbox"/>	
25.	Community meeting analysis (05/06/2011)	<input checked="" type="checkbox"/>	
26.	Community meeting letter (Need to set before questionnaire if not held before) (04/25/2011)	<input checked="" type="checkbox"/>	
27.	Petition and Postal Service response letter (if appropriate) (01/01/1900)	<input checked="" type="checkbox"/>	
28.	Congressional inquiry and Postal Service response letter (if appropriate) (01/01/1900)	<input checked="" type="checkbox"/>	
29.	Proposal checklist (05/17/2011)	<input checked="" type="checkbox"/>	
30.	District notification to Government Affairs (05/18/2011)	<input checked="" type="checkbox"/>	
31.	Instructions to postmaster/OIC to post proposal (05/17/2011)	<input checked="" type="checkbox"/>	
32.	Invitation for comments exhibit (05/18/2011)	<input checked="" type="checkbox"/>	
33.	Proposal exhibit	<input checked="" type="checkbox"/>	
34.	Comment form exhibit (05/17/2011)	<input checked="" type="checkbox"/>	
35.	Instructions for postmaster/OIC to remove proposal (07/15/2011)	<input checked="" type="checkbox"/>	
36.	Round-date stamped proposals and invitations for comments from affected offices (07/22/2011)	<input checked="" type="checkbox"/>	
37.	Notification of taking proposal and comments under internal consideration (07/15/2011)	<input checked="" type="checkbox"/>	
38.	Proposal comments and Postal Service response letters (05/13/2011)	<input checked="" type="checkbox"/>	
39.	Premature Postal Regulatory Commission appeal and Postal Service response letter (if appropriate) ()	<input checked="" type="checkbox"/>	
40.	Analysis of comments (07/22/2011)	<input checked="" type="checkbox"/>	
41.	Revised proposal (if appropriate) (07/22/2011)	<input checked="" type="checkbox"/>	
42.	Updated PS Form 4920 (if appropriate) (05/17/2011)	<input checked="" type="checkbox"/>	
43.	Certification of record (07/22/2011)	<input checked="" type="checkbox"/>	
44.	Log of Post Office discontinuance actions (07/22/2011)	<input checked="" type="checkbox"/>	

Below is the letters that need to go out and forms to complete for Posting the Final Determination for ELLISBURG

ELLISBURG Docket: 1362402 - 13636			
*These are the 1st 18 documents that should be completed Scanned and sent to the MPOO for review			Return to Flow...
Page	Document		
41.	Revised proposal (if appropriate) (07/22/2011)	<input checked="" type="checkbox"/>	
42.	Updated PS Form 4920 (if appropriate) (05/17/2011)	<input checked="" type="checkbox"/>	
43.	Certification of record (07/22/2011)	<input checked="" type="checkbox"/>	
44.	Log of Post Office discontinuance actions (07/22/2011)	<input checked="" type="checkbox"/>	
45.	Transmittal to vice president, Delivery and Retail, from district manager, Customer Service and Sales (07/25/2011)	<input checked="" type="checkbox"/>	
46.	Headquarters' acknowledgment of receipt of record (08/14/2011)	<input checked="" type="checkbox"/>	
47.	Final determination transmittal letter from Headquarters (08/19/2011)	<input checked="" type="checkbox"/>	
48.	Instruction letter to postmaster/OIC on posting (08/23/2011)	<input checked="" type="checkbox"/>	
49.	Round-date stamped final determination cover sheets ()	<input type="checkbox"/>	
50.	Postal Bulletin Post Office Change Announcement ()	<input type="checkbox"/>	
51.	Vice president, Delivery and Retail, instruction letter (08/19/2011)	<input checked="" type="checkbox"/>	

FILE LINK

Back to Flow

-13636

02/24/2011

EDWARD PHELAN
DISTRICT MANAGER
ALBANY PFC

SUBJECT: Authority to Conduct Investigation

I request your authorization to investigate a possible change in postal services for the office in the 23 congressional district.

Post Office Name:	ELLISBURG
Zip+4 Code:	13636-9998
EAS Level:	11
Finance Number:	352655
County:	Jefferson
Proposed Admin Office:	PIERREPONT MANOR PO
ADMIN Miles Away:	3.9
Near Office Name:	PIERREPONT MANOR PO
Near Miles Away:	3.9
Number of Customers:	
Post Office Box:	105
General Delivery:	0
Rural Route (RR):	0
Highway Contract Route (HCR):	35
Intermediate RR:	0
Intermediate HCR:	0
City Delivery:	0
Total Customers:	140

The above office became vacant when the postmaster retired on 03/18/2008.

this is a level 11 office with 105 PO boxes and 35 HCR boxes delivered from this zip code. The HCR also acts as a feeder HCR and transports the mail from/to the Pierrepont Manor Post Office which is 3.94 miles away. Also the Mannsville Post Office is located 4.47 miles away.

JEFFREY SANDS
Manager, Post Office Operations

Approval to Study for Discontinuance:

EDWARD PHELAN
DISTRICT MANAGER
ALBANY PFC

02/24/2011

DATE

cc: Area Manager, Public Affairs and Communication



Docket: 1362402
Item Nbr: 2

-13636

NOTICE OF POST OFFICE EMERGENCY SUSPENSION

A. Office

Name: ELLISBURG State: NY Zip Code: 13636
Area: NORTHEAST District: ALBANY PFC
Congressional District: 23 County: Jefferson
EAS Grade: 11 Finance Number: 352655
Post Office: ☒ Classified Station ☐ Classified Branch ☐ CPO ☐

• There was no Emergency Suspension for this office

Prepared by: Nadine Tremblay
Title: ALBANY PFC Post Office Review Coordinator
Tele No: (518) 452-4080

Date: 03/21/2011
Fax No: (518) 464-7429



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Item Nbr: 3

NOTICE TO CUSTOMERS/DISTRICT PERSONNEL OF SUSPENSION

A. Office

Name: ELLISBURG State: NY Zip Code: 13636
Area: NORTHEAST District: ALBANY PFC
Congressional District: 23 County: Jefferson
EAS Grade: 11 Finance Number: 352655
Post Office: ☒ Classified Station ☐ Classified Branch ☐ CPO ☐

There was no Emergency Suspension for this office

Prepared by: Nadine Tremblay
Title: ALBANY PFC Post Office Review Coordinator
Tele No: (518) 452-4080

Date: 03/21/2011
Fax No: (518) 464-7429



Post Office™ Locations

[PRINT](#) | [BACK](#)

Post Office™ Locations near 13636



1 **Post Office™**
Location -
ELLISBURG
 12109 STATE ROUTE
 193
 ELLISBURG, NY
 13636-9998
 (800) ASK-USPS
 (800) 275-8777
 (315) 846-5511

1.0 mi

Business Hours
 Mon-Fri
 8:00am-12:00pm
 1:00pm-4:45pm
 Sat
 8:15am-11:00am
 Sun
 closed

Services
[PO Boxes Online](#)

Service hours may vary. Please
 check link for business hours.

2 **Post Office™**
Location -
PIERREPONT
MANOR
 4685 US ROUTE 11
 PIERREPONT
 MANOR, NY 13674-
 9998
 (800) ASK-USPS
 (800) 275-8777
 (315) 465-6995

2.9 mi

Business Hours
 Mon-Fri
 8:00am-11:30am
 12:30pm-4:45pm
 Sat
 8:00am-10:45am
 Sun
 closed

Services
[PO Boxes Online](#)

Service hours may vary. Please
 check link for business hours.

3 **Post Office™**
Location -
BELLEVILLE
 8279 STATE ROUTE
 289
 BELLEVILLE, NY
 13611-9998
 (800) ASK-USPS
 (800) 275-8777

Business Hours
 Mon-Fri
 8:00am-12:30pm
 1:30pm-4:45pm
 Sat
 8:00am-11:45am
 Sun
 closed

Services
[PO Boxes Online](#)

Service hours may vary. Please
 check link for business hours.

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(315) 846-5000

3.0 mi

4 **Post Office™**
Location -
MANNSVILLE
 306 S MAIN ST
 MANNSVILLE, NY
 13661-9998
 (800) ASK-USPS
 (800) 275-8777
 (315) 465-4065

3.4 mi

Business Hours
 Mon-Fri
 8:00am-12:30pm
 1:30pm-4:45pm
 Sat
 8:00am-10:45am
 Sun
 closed

Services
[PO Boxes Online](#)

Service hours may vary. Please
 check link for business hours.

5 **Post Office™**
Location - ADAMS
 27 E CHURCH ST
 ADAMS, NY 13605-
 9998
 (800) ASK-USPS
 (800) 275-8777
 (315) 232-2312

6.6 mi

Business Hours
 Mon-Fri
 8:30am-1:00pm
 2:00pm-5:00pm
 Sat
 9:00am-11:00am
 Sun
 closed

Services
[PO Boxes Online](#)

Service hours may vary. Please
 check link for business hours.

Post Office™ Locations near 13636

By City

[ELLISBURG](#) [PIERREPONT
MANOR](#) [BELLEVILLE](#) [MANNSVILLE](#) [ADAMS](#)

By ZIP Code

[13674](#) [13611](#) [13661](#) [13605](#) [13083](#) [13145](#) [13650](#) [13659](#) [13651](#) [13606](#)
[13682](#) [13142](#) [13144](#) [13426](#) [13685](#) [13302](#) [13601](#) [13634](#) [13615](#) [13107](#)

People and Business Search Find people and businesses at [WhitePages.com](#)

People Search

Search for a person and
 perform a reverse lookup
 on phone numbers and
 addresses.

Business Search

Search for a business by name or
 category nationwide.

Reverse Phone Number

See who is calling you

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ITEM NO. 5
PAGE 1

March 21, 2011

RE: Ellisburg NY 13636

Memo to the record. There is no page 5, Eviction Notice.

This is a management initiated study and an eviction does not apply.

Nadine Tremblay

Nadine Tremblay
Post Office Review Coordinator



DOCKET NO. 1362402-13636
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PAGE 1

March 21, 2011

RE: Ellisburg NY 13636

Memo to the record. There is no page 6, Building inspection report and original photos of building deficiencies.

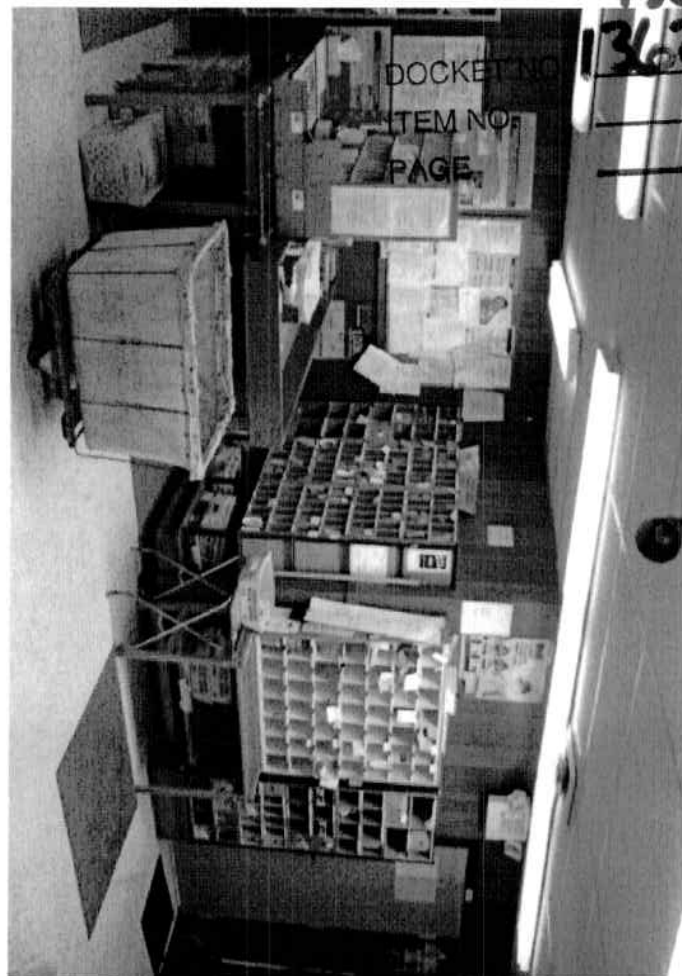
This is a management initiated study; therefore, this item does not apply.

Nadine Tremblay

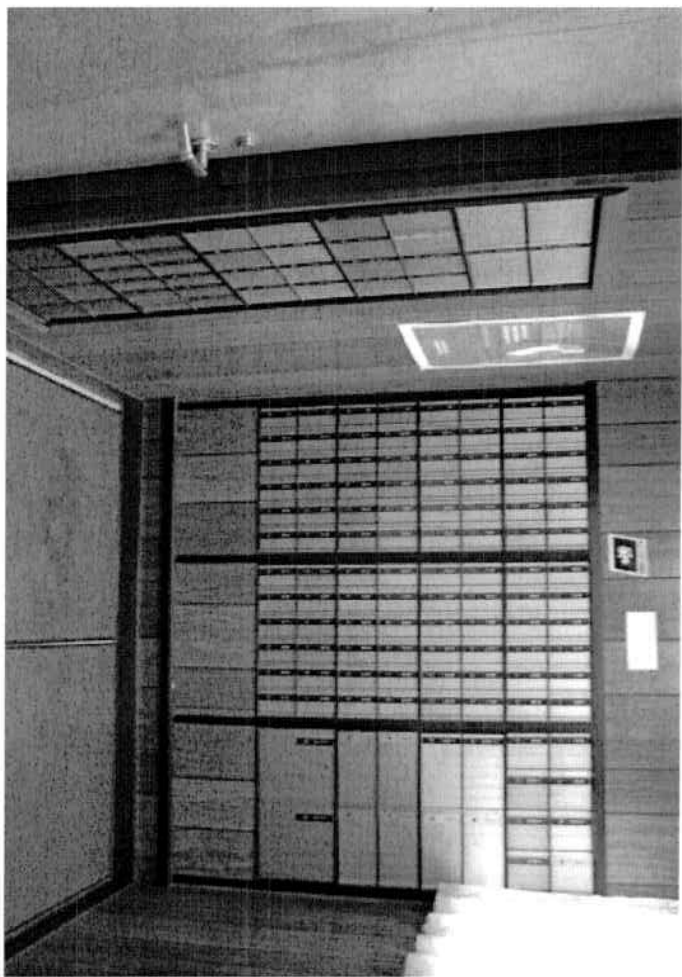
Nadine Tremblay
Post Office Review Coordinator



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PAGE 3

PS Form 150, Postmaster Workload Information

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Post Office, State & Zip Code ELLISBURG, NY 13636		Postmaster's Signature QN66NB	Date 02/28/2011
District Office, State & Zip Code ALBANY PFC, NY 12288		District Manager's Signature KY2CNZ	Date 03/03/2011
(Check Box) <input checked="" type="checkbox"/> Vacancy <input type="checkbox"/> Management Review <input type="checkbox"/> RFR		See Instructions on Reverse	
1.	Current Office Level		11
2.	Finance Number	(1-6)	352655
3.	General Delivery Families Served	(7-9)	0
4.	Post Office Boxes/Call Boxes Rented	(10-15)	108
5.	Possible City Deliveries	(16-20)	0
6.	Administrative Rural Boxes Served	(21-25)	0
7.	Intermediate Rural Boxes Served	(26-30)	0
8.	Administrative Responsibility form Intermediate Rural Boxes for Other Offices	(31-35)	0
9.	Administrative Highway Contract/Star Route Boxes Served	(36-39)	34
10.	Intermediate Highway Contract/Star Route Boxes Served	(40-43)	0
11.	Administrative Responsibility for Intermediate Highway Contract/Star Route Boxes for Other Offices	(44-47)	0
12.	Number of Carrier Stations/Branches	(48-49)	0
13.	Number of Finance Stations/Branches	(50-51)	0
14.	Number of Contract Stations/Branches & Community Post Offices	(52-53)	0
15a.	Does Office Experience A Seasonal Workload? (box one "Y" of yes, "N" for no) (If you answer "yes" of this question, complete 'Seasonal Workload' section on reverse.)	(54)	N
15b.	Duration of Experience A Seasonal Workload? (minimum of 8 weeks)	(55-56)	0
16.	Does Office Perform Outgoing Distribution for Other Offices?	(57)	N
17.	Does Office Perform Incoming Distribution for Other Offices?	(58)	N
18.	Does Office Perform Incoming Secondary Distribution for Other Offices?	(59)	N
19.	Do You Separate All Incoming Letter Size Mail to City & Rural Carrier Routes for Your Own Office?	(60)	Y
20.	Do You Separate All Incoming Flat Size Mail to City & Rural Carrier Routes for Your Own Office?	(61)	Y
21.	Do You Have Responsibility for Vehicle Maintenance Facilities?	(62)	N
22.	Does Your Office Have Administrative Responsibility for an Air Transfer Office?	(63)	N
23.	Is Postmaster Lessor for Government Owned Building?	(64)	N
24.	Does Office Have MPLSM/SPLSM?	(65)	N
25.	Does Office Distribute Food Stamps?	(65)	N

PS Form 150, Postmaster Workload Information

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	Normal	During Seasonal Period
General Delivery Families Served	0	0
Post Office Boxes/Call Boxes Rented	108	0
Possible City Deliveries	0	0
Administrative Rural Boxes Served	0	0
Intermediate Rural Boxes Served	0	0
Administrative Responsibility/Number Intermediate Rural Boxes	0	0
Administrative Highway Contract/Star Route Boxes Served	34	0
Intermediate Highway Contract/Star Route Boxes Served	0	0
Administrative Responsibility/Number Intermediate Highway Contract/Star Route Boxes	0	0

Instructions

- Enter current evaluated office level.
- Enter the 6 digit post office finance number.
- Enter number of general delivery families served.
- Enter total number of post office boxes and call boxes rented. Do not confuse with the total number available. This total should include boxes rented at classified stations/branches as well as the main office including GPO's.
- Enter total possible city deliveries. The total reported should equal the total possible deliveries shown on Form 1621, Carrier Route Report, for the previous accounting period.
- Enter the number of administrative boxes served. This is the number of rural route boxes served, within your ZIP Code ONLY by carriers administratively reporting to you. Do not include boxes on the routes which are in the ZIP Code of an intermediate office.
- Enter the number of intermediate rural boxes served. This is the number of rural boxes, within your ZIP Code, served by a carrier administratively reporting to another postmaster. For credit, the mail must be incoming to your office and separated to the routes within your ZIP Code by you or your employees prior to carrier sequencing.
- Enter the number of intermediate rural boxes for which you are administratively responsible. This is the number of boxes served by a carrier administratively responsible to you, but which are located in the ZIP Code for another office.
- Enter the number of administrative highway contract star route boxes served. This is the total number of star route boxes served within your ZIP Code ONLY by a contractor for whom you have administrative responsibility. Do not include boxes on the routes which are in the same ZIP Code of an intermediate office.
- Enter the number of intermediate highway contract star route boxes served. This is the total number of star route boxes served within your ZIP Code ONLY by a contractor who administratively reports to another Postmaster. For credit the mail must be incoming to your office and separated to the contract route by you or your employees.
- Enter the number of intermediate highway contract star route boxes for which you are administratively responsible. This is the number of boxes served by a contractor for whom you are administratively responsible and which are located in the ZIP Code of another office.
- Enter the number of classified stations and/or branches that have carrier delivery service.
- Enter the number of classified finance stations and/or branches (without carrier delivery service) staffed by postal employees.
- Enter the total number of contract stations, rural stations and community post offices.
 - A contract station is a detached finance unit manned by non-postal employees.
 - A rural station is a post office box delivery unit serviced by a rural carrier.
 - A community post office is a contract unit which provides service in a small community.
- To receive credit for a seasonal workload increase the items shown on the seasonal workload portion of the form must show a 25% increase and must last for a minimum of 8 weeks. The Christmas Season is not to be considered as a seasonal workload increase. Should your office have a seasonal workload increase you should enter the exact number of weeks the season lasts and complete the seasonal workload portion of the form in its entirety.

Questions 16 Thru 25 Should Be Answered Y (Yes) or N (No)

- Does office separate massed outgoing mail originating in other associate offices to three digit ZIP CODE designating offices and/or area distribution centers and demonstrate a culling, facing and cancelling operation?
- Does office separate massed three digit sorted incoming mail to a five digit sort for other associate offices?
- Does office separate incoming mail to carrier routes for other associate offices?
- Does office separate all incoming letter size mail to city, rural and/or star routes?
- Does office separate all incoming flats to city and/or rural carrier routes without assistance from an MPC?
- Do you have a vehicle maintenance facility under your jurisdiction?
- Do you have an air transfer office under your jurisdiction?
- Do you occupy a government-owned building and lease a portion of the building to someone else?
- Does your office operate a Multiple Position Letter Sorting Machine (MPLSM) or Single Position Letter Sorting Machine (SPLSM)?
- Does your office distribute food stamps?

Worksheet for calculating Workload Service Credit (WSC) for Post Offices

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Worksheet for calculating Workload Service Credit (WSC) for Post Offices

Office Name: ELLISBURG
Office Zip+4: 13636 -9998 District: ALBANY PFC

Activity WSCs

General Delivery Families Served (Item 3, PS Form 150)	<u>0</u>	X 1.0	=	<u>0</u>
Post Office Boxes/Call Boxes Rented (Item 4, PS Form 150)	<u>108</u>	X 1.0	=	<u>108</u>
Possible City Deliveries (Item 5, PS Form 150)	<u>0</u>	X 1.33	=	<u>0</u>
Administrative Rural Boxes Served (Item 6, PS Form 150)	<u>0</u>	X 1.0	=	<u>0</u>
Intermediate Rural Boxes Served (Item 7, PS Form 150)	<u>0</u>	X 0.7	=	<u>0</u>
Administrative Responsibility for Intermediate Rural Boxes for Other Offices (Item 8, PS Form 150)	<u>0</u>	X 0.3	=	<u>0</u>
Administrative Highway Contract/Star Route Boxes Served (Item 9, PS Form 150)	<u>34</u>	X 1.0	=	<u>34</u>
Intermediate Highway Contract/Star Route Boxes Served (Item 10, PS Form 150)	<u>0</u>	X 0.7	=	<u>0</u>
Administrative Responsibility for Intermediate Highway Contract/Star Route Boxes for Other Offices (Item 11, PS Form 150)	<u>0</u>	X 0.3	=	<u>0</u>
Total Activity WSCs				<u>142</u>

Revenue WSCs

First	25 revenue units:	1.00	X	<u>25</u> units	=	<u>25.00</u>
Next	275 revenue units:	0.50	X	<u>62</u> units	=	<u>31.00</u>
Next	700 revenue units:	0.25	X	<u>0</u> units	=	<u>0.00</u>
Next	5000 revenue units:	0.10	X	<u>0</u> units	=	<u>0.00</u>
	Balance of revenue units:	0.01	X	<u>0</u> units	=	<u>0.00</u>
Total revenue WSCs:						<u>56.00</u>

Activity WSCs 142 + Revenue WSCs = 56.00 Base WSCs 198.00 = EAS Grade 11Previous evaluation: EAS grade 11Effective date of change in service hours: _____ (if appropriate)
(when a vacancy exists, hours must reflect the appropriate EAS grade)

Worksheet completed by:

NADINE TREMBLAY

NADINE.M.TREMBLAY@USPS.GOV

Printed Name

Signature

ALBANY PFC District Review Coordinator

02/28/2011

Title

Date

Window Transaction Survey

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Window Transaction Survey									
PO Name:	ELLISBURG	ZIP+4:	13636 - 9998	Completed By:	F26520				
Survey Period:	03/05/2011	through	03/18/2011						
<p>Record the number of retail window transactions in the appropriate columns for each day. Consider a sale of stamps as one transaction. A sale of stamps and a money order is two transactions. Do not record the handing out over the counter of box mail, general delivery mail, or carrier mail. Instead of this worksheet, you may use PS Form 2007-A, Window Transaction Record; PS Form 2007-B, Window Transaction Conversion; and PS Form 2007-C, Window Transaction Survey. Use hash marks (///) for daily entries in the columns. To obtain the average daily number of transactions, divide the total number of transactions during the survey period by the number of days in the survey. The allowable time per transaction is shown in each column in minutes. To determine the average daily workload in minutes, multiply the number of transactions in each column by the time conversion for that column, total the time conversions for all columns, and divide the total number of minutes by the number of days in the survey period.</p>									
Day/Date	Postage Sales (.777)	Priority Parcels Money Orders (1.083)	Express Registered C.O.D. (1.969)	Passports Meter Settings (5.06)	Box Rent (2.875)	Certified Insured Special Service (1.792)	Misc. Services (1.787)	Nonrevenue Services (1.787)	
Sat - 03/05	6	3	1	0	1	0	1	5	
Sun - 03/06	0	0	0	0	0	0	0	0	
Mon - 03/07	12	4	1	0	0	1	0	10	
Tue - 03/08	10	2	1	0	1	0	0	3	
Wed - 03/09	14	1	1	0	0	4	0	8	
Thu - 03/10	18	1	1	0	0	0	0	8	
Fri - 03/11	10	2	1	0	2	0	1	6	
Sat - 03/12	8	1	1	0	1	0	0	6	
Sun - 03/13	0	0	0	0	0	0	0	0	
Mon - 03/14	13	2	1	0	2	0	0	15	
Tue - 03/15	9	6	1	0	0	1	1	11	
Wed - 03/16	10	1	1	0	0	0	0	14	
Thu - 03/17	11	2	3	0	0	0	0	15	
Fri - 03/18	12	5	2	0	0	0	0	16	
TOTALS	133	30	15	0	7	6	3	117	
Time Factor	X .777	X 1.083	X 1.969	X 5.06	X 2.875	X 1.792	X 1.787	X 1.188	
Daily Average	8.6	2.7	2.5	0.0	1.7	0.9	0.4	11.6	
Average Number Daily Transactions:				25.9	Average Daily Retail Workload in Minutes:				28.4

Survey of Incoming Mail

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Survey of Incoming Mail
(Record in Pieces)

Post Office Name and Zip+4

ELLISBURG 13636 - 9998

Dates Recorded

03/05/2011 through 03/18/2011

Date	Letters		Flats		Parcels		Other	
	First Class	Standard	First Class	Standard	Priority	Standard		
Sat - 03/05	324	154	65	50	3	9	0	0
Sun - 03/06	0	0	0	0	0	0	0	0
Mon - 03/07	481	200	165	70	0	10	0	0
Tue - 03/08	255	85	28	10	0	10	0	0
Wed - 03/09	227	76	38	38	2	9	0	0
Thu - 03/10	300	21	100	63	6	2	0	0
Fri - 03/11	184	100	96	276	4	7	0	0
Sat - 03/12	304	150	53	100	7	7	0	0
Sun - 03/13	0	0	0	0	0	0	0	0
Mon - 03/14	400	243	100	130	10	13	0	0
Tue - 03/15	180	104	37	30	3	3	0	0
Wed - 03/16	105	160	60	36	1	3	0	0
Thu - 03/17	199	170	9	20	5	9	0	0
Fri - 03/18	387	154	57	145	8	3	0	0
TOTALS	3,346	1,617	808	968	49	85	0	0
Daily Average	278.8	134.8	67.3	80.7	4.1	7.1	0.0	0.0

Signature of Person Making Count:

F26520

Printed Name:

F26520

Date:

03/18/11

Conversion Rate

Letter Type	Total Pieces Per Foot	Flat Type	Total Pieces Per Foot
Manual Letters	227	Manual Flats	115
Automated Letters	215	Automated Flats	115
Sequenced Letters	227	Sequenced Flats	115

Conversion rates are subject to periodic updates which will be published and disseminated when applicable.

Survey of Dispatched Mail

Docket: 1362402 - 13636

Page Nbr: 12

Survey of Dispatched Mail
(Record in Pieces)

Post Office Name and Zip+4

ELLISBURG 13636 - 9998

Dates Recorded

03/05/2011 through 03/18/2011

Date	Letters		Flats		Parcels		Other	
	First Class	Standard	First Class	Standard	Priority	Standard		
Sat - 03/05	49	0	0	0	0	4	1	0
Sun - 03/06	0	0	0	0	0	0	0	0
Mon - 03/07	98	15	9	0	2	0	1	0
Tue - 03/08	195	2	5	0	2	0	1	0
Wed - 03/09	129	3	7	1	1	0	1	0
Thu - 03/10	156	0	14	4	2	0	1	0
Fri - 03/11	125	0	11	1	0	2	1	0
Sat - 03/12	38	2	4	2	1	0	1	0
Sun - 03/13	0	0	0	0	0	0	0	0
Mon - 03/14	110	6	14	1	3	1	1	0
Tue - 03/15	102	0	1	2	6	1	1	0
Wed - 03/16	76	0	6	0	1	0	1	0
Thu - 03/17	107	0	12	0	3	4	1	0
Fri - 03/18	563	0	6	15	3	0	1	0
TOTALS	1,748	28	89	26	24	12	12	0
Daily Average	145.7	2.3	7.4	2.2	2.0	1.0	1.0	0.0

Signature of Person Making Count:

F26520

Printed Name:

F26520

Date:

03/18/11



03/29/2011

OIC/POSTMASTER

SUBJECT: ELLISBURG Post Office

Please provide the names and addresses of businesses, religious institutions, civic organizations, and local government offices, and schools that are served by the ELLISBURG Post Office. The list of businesses should include small, part-time and in-home businesses, as well as public institutions, such as schools, police departments, etc; religious institutions and businesses physically located outside the community that use retail services on a routine basis at the ELLISBURG Post Office. Also, please provide the total number of permit mailers and postage meter customers. Indicate in the space below the total number of Post Office box, general, and street delivery customers served by the office. Return all documents to NADINE TREMBLAY by 04/12/2011. This information will be entered into the official record for public viewing.

Post Office Box	<u>108</u>
General Delivery	<u>0</u>
Rural Route (RR)	<u>0</u>
Highway Contract Route (HCR)	<u>34</u>
Intermediate RR	<u>0</u>
Intermediate HCR	<u>0</u>
City Delivery	<u>0</u>
Total Customers	<u>142</u>

If you have any comments on alternate means of providing services to the ELLISBURG customers, please provide them below:

Free E boxes. Would have to be an extension of HCR, or RR from other ofcs

NADINE TREMBLAY
Post Office Review Coordinator

Comments:

cc: Official Record

02/25/2011

SUBJECT: Possible Discontinuance of Post Office

The Postal Service is currently conducting an investigation concerning the possible discontinuance of the ELLISBURG Post Office, 13636 - 9998, located in Jefferson County. Please search your records for any recent reports of mail theft or vandalism in the area.

Please enter your findings in the yellow blocks below. Once complete please click submit. You can print from above. Signatures are captured electronically.

Thank you for your assistance in this matter

NADINE TREMBLAY
Post Office Review Coordinator
ALBANY PFC

NBR records of mail theft or vandalism: 2

Comments/Findings:

cc: Official Record



04/29/2011

Jefferson County Sheriff
753 Waterman Dr
Watertown, NY 13601

SUBJECT: Possible Discontinuance of Post Office

The Postal Service is currently conducting an investigation concerning the possible discontinuance of the Ellisburg Post Office, 13636 - 9998, located in Jefferson County. Please search your records for any recent reports of mail theft or vandalism in the area.

Please return your findings in the enclosed envelope. You may use the bottom of this form to report your findings, accompanied by your signature, title, and date.

Thank you for your assistance in this matter

NADINE TREMBLAY
Post Office Review Coordinator
ALBANY PFC

Enclosure: Return Envelope

NO RECORD
Jefferson County Sheriff's Office
Date 4/2/11
Verified By M. Mine

Nbr records of mail theft or vandalism: ____

Comments/Findings:

cc: Official Record

Post Office Survey Sheet

Post Office Name	<u>ELLISBURG</u>	ZIP+4	<u>13636-9998</u>
Congressional District	<u>23</u>	Date	<u>03/30/2011</u>

1. List specific information about the facility, such as structural defects, safety hazards, lack of running water or restrooms (if so, where restrooms are available), security, and other deficiencies or factors to consider.

None known

2. Is the facility accessible to persons with disabilities? ☒ Yes ☐ No

3. Lease terms? 30-day cancellation clause? 02/28/2011 Extended through 2016 no clause

4. Are suitable alternate quarters available for an independent Post Office? If so, where?

Pierrepoint Manor or Mannsville

5. List potential CPO sites.

CPU sites investigated by Retail

6. Are there any postage meter customers or permit mailers? ☐ Yes ☒ No

If yes, please identify them by name and address.

7. Which career and noncareer employees will be affected and what accommodations will be made for them?

PM position is vacant. If there is a PMR, clerk or carriers, POOM will review vacancies elsewhere

8. How is mail received and dispatched at the office and at what times? How will this be affected by discontinuance? Will a collection box be retained? Will a locked pouch be utilized?

HCR Stop eliminated Collection box removed unless on carrier's line of travel No lock pouch needed

How Post Office boxes are installed? 154

How Post Office boxes are used? 108

What are the window service hours? 08:00 - 12:00 - 13:00 - 16:45 M-F

08:15 - 11:00 S

What are the lobby hours? 08:00-17:00 M-F

08:15 - 11:15 S

9. Have there been recent cases of mail theft or vandalism reported to the postmaster/OIC? Explain.

Not Known

10.	What equipment in the Post Office is not owned by the Postal Service (e.g., Post Office Boxes, furniture, safe)? Not Known	
11.	List potential CBU/parcel lockers sites and distances from present Post Office site. Town clerk's office, 1/2 mile; Library, next door.	
12.	Are there any special customer needs? (People who cannot read or write, who cannot drive, who have infirmities or physical handicaps, etc.) How can these people be accommodated? a few elderly, OIC helps with their mail, there are some chairs in the lobby, they sit & take a break before they leave	
13.	Rural delivery/HCR delivery.	
a.	What is current evaluation?	
b.	Will this change result in the route being overburned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If so, what accommodations will be made to adjust the route?	Add Aux or split if necessary
c.	How many boxes and miles will be added to the route?	84, box 6 Miles
d.	What would be the additional annual expense if the route is increased?	13155
e.	What is the one-time cost of CBU/parcel locker installation (if appropriate)?	0
f.	At what time of the day does the carrier begin delivery to the community?	
	Will this delivery time be affected if the office is discontinued? (Y or N)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If so, how?	0
14.	Are the Post Office box fees at the facility that will provide alternative service different from those at the office to be discontinued? If so, how (Cost)? <input type="checkbox"/> More <input checked="" type="checkbox"/> Same <input type="checkbox"/> Less	

Community Survey Sheet

Community Survey Sheet

Post Office Name	<u>ELLISBURG</u>	ZIP+4	<u>13636-9998</u>
Congressional District	<u>23</u>	Date	<u>03/29/2011</u>

1. Incorporated? ☐ Yes ☒ No
Local government provided by: Village of Ellisburg
Police protection provided by: Jefferson County Sheriff
Fire protection provided by: Ellisburg Vol. FD
School location: Belleville CSD
2. What population growth is expected? (Please document your source)
Projected Annual Household Growth Rate: 0.54% Growth Link see attached
3. What residential, commercial, or business growth is expected? (Please document your source)
see attached Sperlings Best Places
4. History. (Are there any special historical events related to the community?
Are there any special community events to consider?
Is the Post Office facility a state or national historic landmark (see ASM 515.23)?
Check with the field real estate office when verification is needed.)
see attached Wikipedia.org
5. What is the geographic/economic make-up of the community (e.g., retirees, commuters, self-employed, farmers)?
see attached US Census Bureau
6. Which nonpostal services are provided by the Post Office (e.g., public bulletin board,
school bus stop, community meeting location, voting place, government form distribution center.
Do employees of the office offer assistance to senior citizens and handicapped)?
What provisions can be made for these services if the Post Office is discontinued?
Public bulletin board, tax forms, Selective Service forms

ZIP CODE DEMOGRAPHIC REPORT

Post Office Name: Ellisburg, NY
ZIP Code: 13636

Total Population:		Total Households:	
2010	326	2010	109
2015	332	2015	112

Projected Annual Household Growth Rate: 0.54%

Facility Planning 2010 Dataset

New ZIP Code Search

Highway Contract Route Cost Analysis Form

Highway Contract Route Estimated Cost for Alternative Service

Office Name: ELLISBURG

Office Zip+4: 13636 -9998

District: ALBANY PFC

1. Enter the number of additional boxes to be added to the route 84 x 3.64 hours per year 305.76

2. Enter the number of additional miles to be added to the route 6.74 x 10.40 hours per year 70.10

Total time added to the route 375.86

3. Enter the HCR hourly rate
(Contact Area Manager, Purchasing/Contracting Officer) 35.00

Total additional compensation (HCR hourly rate x total time added to the route) 13,155.10

Rural Route Cost Analysis Form

Docket: 1362402 - 13636

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Page Nbr: 2

Rural Route Carrier Estimated Cost for Alternative Replacement Service

Office Name: ELLISBURG

Office Zip+4: 13636 -9998

District: ALBANY PFC

1. Enter the number of additional boxes to be added to the rural route

0

2. Enter the number of additional miles to be added to the route
Enter the volume factor

0.00

0.00

Total (additional boxes x volume factor) 0.00

3. Enter the number of additional boxes to be added to the rural route

0

Centralized boxes

0.00

x 1.00 Min

0.00

Regular L route boxes

0.00

x 1.82 Min

0.00

Regular Non-L route boxes

0.00

x 2.00 Min

0.00

Total additional box allowance 0.00

4. Enter the number of additional daily miles to be added to the rural route

0.00

x 12 Mileage
Standard

0.00

Total additional minutes per week
(miles carried to two decimal places) 0.00

5. Total additional annual minutes
(additional minutes per week year)

0.00

x 52 Weeks

0.00

6. Total additional annual hours
(additional annual minutes/
60 minutes per hour)

0.00

/ 60 Minutes

0.00

7. Enter the rural cost per hour (see
national payroll summary report – rural
carrier, consolidated)

0.00

Total Annual Cost (additional annual hours x rural cost per hour) 0.00

8. Enter lock pouch allowance (if applicable)

0.00

Total annual cost for alternate service (annual cost minus lock pouch allowance) 0.00

U.S. Postal Service POST OFFICE CLOSING OR CONSOLIDATION PROPOSAL Fact Sheet				1. Date Prepared 03/30/2011																								
2. Post Office Name ELLISBURG		3. State and ZIP + 4 Code NY, 13636-9998																										
4. District, Customer Service ALBANY PFC	5. Area, Customer Service NORTHEAST	6. County Jefferson	7. Congressional District 23																									
8. Reason for Proposal to Discontinue this is a level 11 office with 105 PO boxes and 35 HCR boxes delivered from this zip code. The HCR also acts as a feeder HCR and transports the mail from/to the Pierrepont Manor Post Office which is 3.94 miles away. Also the Mannsville Post Office is located 4.47 miles away.		9. PO Emergency Suspend (Reason and Date) No Suspension		10. Proposed Permanent Alternate Service																								
11. Staffing		12. Hours of Service																										
a. <input type="checkbox"/> PM <input checked="" type="checkbox"/> PM Vacancy Reason & Date: retired Occupied 03/18/2008 b. <input type="checkbox"/> OIC <input type="checkbox"/> Career <input type="checkbox"/> Non-Career c. Current PM POSITION Level (150)EAS-11 Downgraded from EAS-11 d. No of Clerks-0 No of Career-0 No of Non-Career-0 e. No of Others-0 No of Career-0 No of Non-Career-0		a. Time M-F 08:00 - 12:00, 13:00 - 16:45 Sat 08:15 - 11:00 a. Lobby Time M-F 08:00-17:00 Sat 08:15 - 11:15 Total Window Hours Per Week 0.00																										
13. Number of Customers Served		14. Daily Volume (Pieces)																										
a. General Delivery 0 b. P.O. Box 108 c. City Delivery 0 d. Rural Delivery 0 e. Highway Contract Route Box 34 f. Total 142 g. No. Receiving Duplicate Service 0 h. Average No. Daily Transactions 25.90		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Types of Mail</th> <th>Received</th> <th>Dispatched</th> </tr> </thead> <tbody> <tr><td>a. First-Class</td><td>413</td><td>148</td></tr> <tr><td>b. Newspaper</td><td>148</td><td>9</td></tr> <tr><td>c. Parcel</td><td>11</td><td>3</td></tr> <tr><td>d. Other</td><td>0</td><td>1</td></tr> <tr><td>e. Total</td><td>572</td><td>161</td></tr> <tr><td>f. No. of Postage Meters</td><td></td><td>0</td></tr> <tr><td>g. No. of Permits</td><td></td><td>0</td></tr> </tbody> </table>			Types of Mail	Received	Dispatched	a. First-Class	413	148	b. Newspaper	148	9	c. Parcel	11	3	d. Other	0	1	e. Total	572	161	f. No. of Postage Meters		0	g. No. of Permits		0
Types of Mail	Received	Dispatched																										
a. First-Class	413	148																										
b. Newspaper	148	9																										
c. Parcel	11	3																										
d. Other	0	1																										
e. Total	572	161																										
f. No. of Postage Meters		0																										
g. No. of Permits		0																										
Finances a. FY 2008 2009 2010		Receipts \$ 39,248 \$ 35,270 \$ 33,228	b. EAS Step 1 PM Basic Salary (no Cola) \$ 33168	c. PM Fringe Benefits (33.5% of b.) \$11,111																								
15a. Quarters																												
<input type="checkbox"/> Postal Owned <input checked="" type="checkbox"/> Leased (if Leased, Expiration Date) 02/28/2016 Annual Lease \$ 12000 30-day cancellation clause? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Evicted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (if Yes, must vacate by) Located in: <input type="checkbox"/> Business <input type="checkbox"/> Home <input checked="" type="checkbox"/> Other Suitable alternate quarters available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																												
15b. Explain: No termination clause, could offer a buy-out. Alternate service at Pierrepont Manor Post Office																												
17. Schools, Churches and Organization in Service Area: No: 0		19. Administrative/Emanating Office (Proposed): Name PIERREPONT MANOR PO EAS Level 11 Miles Away 3.9 Window Service Hours: M-F 08:00 16:45 SAT 08:00 10:45 Lobby Hours: M-F 08:00-17:00 SAT 08:00-11:00 PO Boxes Available: 89																										
18. Businesses in Service Area: No: 0		20. Nearest Post Office (if different from above): Name PIERREPONT MANOR PO EAS Level 11 Miles Away 3.9 Window Service Hours: M-F 08:00 16:45 SAT 08:00 10:45 Lobby Hours: M-F SAT PO Boxes Available: 0																										
21. Prepared by																												
Printed Name and Title NADINE TREMBLAY		Signature NADINE TREMBLAY		Telephone No. AC () (518) 452-4080																								
PO Discontinuance Coordinator Name NADINE TREMBLAY		Location ALBANY, NY																										



A. Office

Name: ELLISBURG State: NY Zip Code: 13636
Area: NORTHEAST District: ALBANY PFC
Congressional District: 23 County: Jefferson
EAS Grade: 11 Finance Number: 352655
Post Office: ☒ Classified Station ☐ Classified Branch ☐ CPO ☐

This form is a place holder for number 19. And the verification of new service type is complete.

Prepared by: Nadine Tremblay
Title: ALBANY PFC Post Office Review Coordinator
Tele No: (518) 452-4080

Date: 04/04/2011
Fax No: (518) 464-7429



05/05/11

OIC/POSTMASTER

SUBJECT: ELLISBURG Post Office

Enclosed are questionnaires addressed to customers of the ELLISBURG Post Office. I have also enclosed additional copies of the questionnaires for any retail or other customer who wishes to complete one. Please furnish these questionnaires to retail customers upon request. All completed forms should be forwarded to my office by 05/21/11 for further review.

Nadine Tremblay
Post Office Review Coordinator
Enclosures



04/25/2011

POSTAL CUSTOMER
ELLISBURG POST OFFICE
ELLISBURG, NY 13636

Dear Postal Service Customer:

As the Postal Service manager responsible for all Post Offices in your area, I would like your opinion concerning a possible change in the way your postal service is provided. The recommended change is tentative and will not lead to a formal proposal unless we conclude that it will provide a maximum degree of regular and effective service.

The Postmaster at the Ellisburg Post Office retired on 03/18/2008. The Office is being studied for possible closing or consolidation for the following reasons: This is a level 11 office with 105 PO boxes and 35 HCR boxes delivered from this zip code. The HCR also acts as a feeder HCR and transports the mail from/to the Pierrepont Manor Post Office which is 3.94 miles away. The Mannsville Post Office is located 4.47 miles away. This is a management initiated study to determine if regular and effective service can be provided through alternate access.

Briefly, we would like to provide pickup and delivery of your mail, as well as the sale of stamps and all other customary postal services, by rural route service emanating from the Pierrepont Manor Post Office.

We estimate that carrier service would cost the Postal Service substantially less than maintaining the Post Office in your community and still provide regular and effective service. Enclosed is information about some of the services available from the carrier. Retail services are also available at the Pierrepont Manor Post Office, located 3.9 miles away. Hours of service at this office are 08:00 to 11:30 and 12:30 to 16:45, Monday through Friday, and 08:00 to 10:45 on Saturday. Post Office box service is available at this location at the same fees.

SERVICES AVAILABLE FROM RURAL AND HIGHWAY CONTRACT ROUTE CARRIERS: * Mailing Packages, * Purchasing Stamps By Mail, * Purchasing Postal Money Orders, * Special Services, * Holding Mail.

I invite you to think about a possible change to rural route service. Please return the enclosed questionnaire by 05/04/2011 using the pre-addressed envelope provided or at the community meeting.

You may, of course, want to discuss this form of service with us before drawing any conclusions. Postal representatives will be at the Ellisburg Town Hall 11832 S Main St Ellisburg, NY 13636 on Wednesday, May 04, 2011 from 6:00 pm to 8:00 pm to answer questions and provide information about our service. You may wish to discuss and submit your questionnaire at that time.

If you have any questions, you may call Nadine Tremblay at (518) 452-4085.

Thank you for your assistance.

Sincerely,

A handwritten signature in dark ink, appearing to read "Jeffrey Sands".

JEFFREY SANDS
Manager, Post Office Operations
30 Karner Rd
Albany, NY, 12288-9992

Enclosures:

Questionnaire and return envelope Summary of Post Office Change Regulations,
Carrier delivery information CBU information sheet (when appropriate)



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☐ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☐ NO
- b. Using for school bus stop ☐ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☐ NO

If yes, please explain:



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive
3. Post Office box service or general delivery service, complete this section. How do you think carrier route delivery service will compare to your current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐ Shopping

☐ Personal needs

☐ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Mailing Address

Name:

Address:

Telephone:

Date:

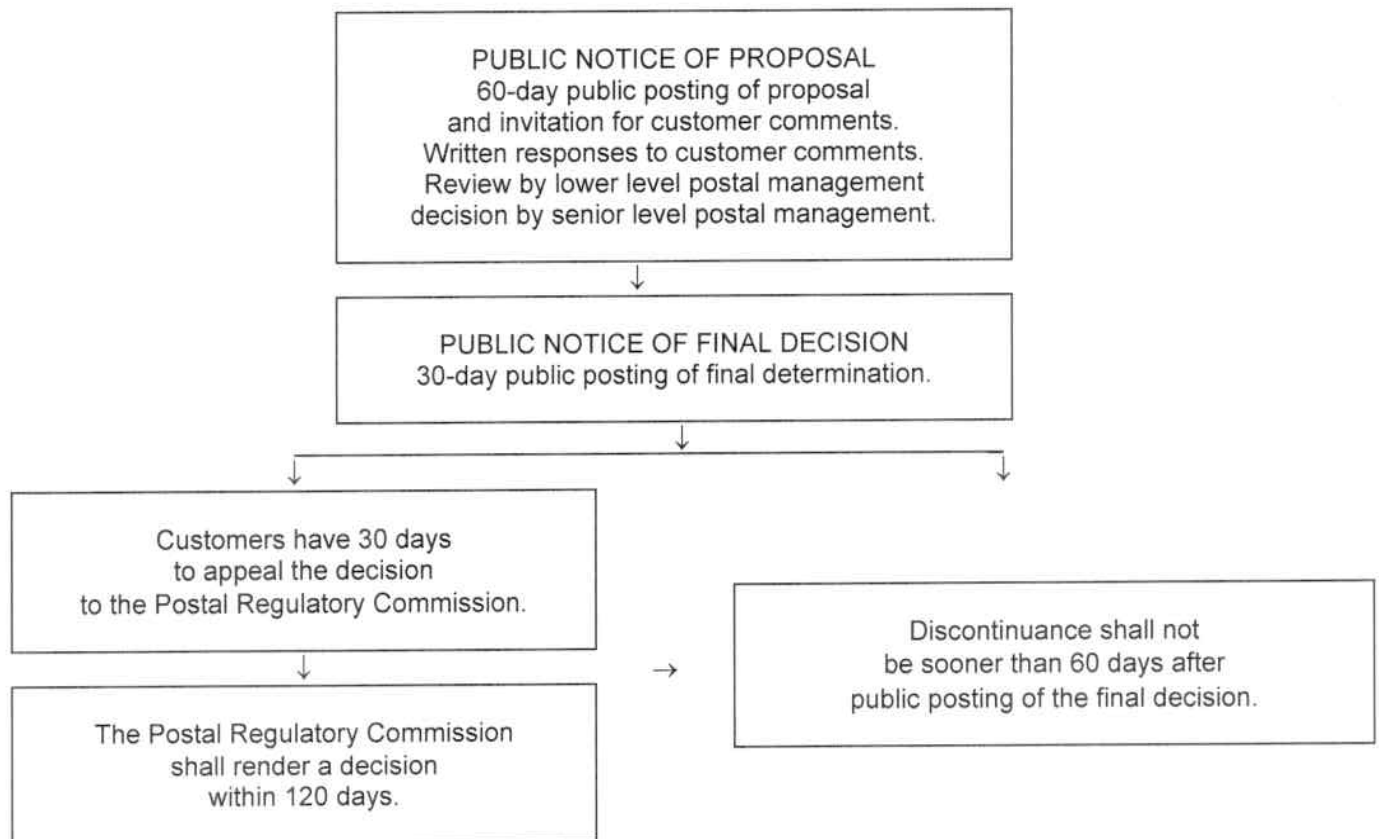
Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

SUMMARY OF POST OFFICE CHANGE REGULATIONS

Certain regulations based on federal law apply when postal managers propose to replace a Post Office with an alternate form of postal service. These regulations are designed to ensure that the reasons for proposing such changes in postal service are fully disclosed at a stage when customers can make helpful contributions toward a final decision. The full text of the statutory provisions appears in Title 39, *United States Code*, Section 404(b), while the implementing regulations appear in Title 39, *Code of Federal Regulations*, Part 241.3.

According to implementing regulations, an initial investigation and any subsequent formal proposal to discontinue a Post Office originate with postal field managers responsible for Post Offices in that area. The proposal must explain the services recommended as substitutes and the rationale that supports this recommendation. The written proposal is prominently posted for 60 days at affected Post Offices, along with an "Invitation for Comments," which formally invites customer comments. At the end of the 60-day comment period, additional review is made at lower and upper levels of postal management.

When a final decision is made at Postal Headquarters in Washington, DC, that decision is posted in affected Post Offices for 30 days, during which customers may appeal the decision to the Postal Regulatory Commission in Washington, DC. The Postal Regulatory Commission has 120 days to consider and decide an appeal. Even without an appeal, no Post Office may be closed sooner than 60 days after the public posting of the final decision.



Notice

Services at the
Ellisburg Post Office
are being studied for possible
discontinuance.

Postal Representatives will be at
the Ellisburg Town Hall, 11832 S.
Main St., Ellisburg, NY 13636 on
05/04/2011 from 6:00 PM to 8:00
PM to discuss alternative services
available to the community, the
service you now receive, and what
effect officially discontinuing the
Ellisburg Post Office will have on
customers and the community.

We look forward to meeting with
you to discuss this important
matter.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<i>Sometimes</i> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<i>Sometimes</i> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☒ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☒ Personal needs

☒ Banking

☒ Employment

☒ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name:

Brian & Courtney Overton

Address:

P.O. Box 104, Ellisburg, NY 13636

Telephone:

315 - 846 - 5120

Date:

4/27/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping



Personal needs



Banking



Employment



Social needs

5. Do you currently use local businesses in the community?



Yes



No

If yes, would you continue to use them if the Post Office is discontinued?



Yes



No

Name:

Merrill Bertram

Address:

Po Box 29

Telephone:

Date:

4-27-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☐ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☐ NO
- b. Using for school bus stop ☐ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐ Shopping

☐ Personal needs

☐ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

What? there are NO businesses here

Name:

Why do you bother to ask?

Address:

Our opinion doesn't count and

Telephone:

this is just a formality - just like

Date:

The water district - village is dead -

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

bury it



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO

- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐ Shopping

☐ Personal needs

☐ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Address:

Telephone:

Date:

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain: Less convenient, and more out of my way.

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Watertown, Syracuse

☒ Personal needs Watertown, Adams

☒ Banking Watertown, Adams Center

☒ Employment Watertown, Adams

☒ Social needs Watertown, Syracuse

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: William Shelmidge

Address: 12116 NYS Route 193, Ellisburg, NY, 13636

Telephone: (315) 777-3035

Date: 4/26/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☒ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☒ YES ☐ NO

If yes, please explain:

Lost dogs + cats / all Sales / Fish Fries / Rumor

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

If yes, please explain:

I work in Adams or Belleville Postal, Pierpont Manor

Note: Why not close on Sat. Closing that would not mean anything to us.



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better ☐ Just as Good ☐ No Opinion ☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

<input checked="" type="checkbox"/>	Shopping	Watertown
<input type="checkbox"/>	Personal needs	Kinney Drugs - Adams
<input type="checkbox"/>	Banking	Adams
<input type="checkbox"/>	Employment	Adams
<input type="checkbox"/>	Social needs	Bellville

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: Barb & W. Frame Chamberlain

Address: PO Box 80 Rte 289 Ellisburg NY 13636

Telephone: (315) 846-5508

Date: 4/25/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

I have a daughter in Afghanistan + she has all her mail sent to me at Box 80. This will mean all her transactions will have to change. I enjoy going to the Post Office to send boxes out to her + our 8 Grandchildren. Please keep our office in Ellisburg, if we can + keep our P.O. Box 80, we will have to change all our address for bills too. Thank you Barb



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

when I need to, it varies

Other Postal Services

a. Entering permit mailings	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
b. Resetting/using postage meter	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

Nonpostal Services

a. Picking up government forms (such as tax forms)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
b. Using for school bus stop	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
c. Assisting senior citizens, persons with disabilities, etc.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

If yes, please explain:

d. Using public bulletin board	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
e. Other	<input type="checkbox"/> YES	<input type="checkbox"/> NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
---	-----------------------------

If yes, please explain:

but they are out of my way



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

I don't think its better when we have to do a change of address after living here w/same address for almost 20 years!

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping

adams NY



Personal needs

many places



Banking

Watertown



Employment

"



Social needs

5. Do you currently use local businesses in the community?



There are none

If yes, would you continue to use them if the Post Office is discontinued?



Name:

Robbie John Disbrie

Address:

11787 South Main St., PO Box 30 Ellisburg NY 13636

Telephone:

(315) 846-5820

Date:

4/26/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

It wouldn't be as big as inconvenience if we could use our 911 address with a general delivery !!!



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Big M, Dollar General

☒ Personal needs Dollar General

☒ Banking Watertown Savings bank

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☒ No

Name:

Alicia Piper

Address:

12078 state route 193 Ellisburg Ny 13636

Telephone:

315-846-5859

Date:

4-25-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

- With no vehicle its easy just to walk down the road to do our mail, get stamps and do money orders.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:

Belleville



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

- ☒ Shopping Adams, Watertown
- ☒ Personal needs Adams, Watertown
- ☒ Banking Adams
- ☐ Employment Self employed, no territory restrictions, global
- ☒ Social needs Adams, Watertown

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: Mary Ellen Gingrich

Address: 10480 NYS Rt 193 Ellisburg NY 13636

Telephone: FE 315-846-5397

Date: 4/26/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:

Bellerville, Adams (or Peaseport Manor - if I needed to go that way).



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☒ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain: No fee for PO Box
delivered to our home

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

- ☒ Shopping Adams, Bellville, Sandy Creek, Pulaski, Watertown
☒ Personal needs Adams, Watertown, Pulaski
☒ Banking Adams
☐ Employment N/A
☒ Social needs Bellville, Adams, Watertown

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: Stanley/Susan Thomas

Address: PO 56 Ellisburg, NY 13636

Telephone: 315-846-5680

Date: 4/25/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

We have considered changing to a rural carrier Manneville address as several of our neighbors have because of the increases in the box rent. Also, then the mail would be delivered to our home and we would not have to get the car out just to go to the PO. We have already stopped going daily.
Why is a PO needed in Pierrepont Manor and Manneville?



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☒ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☒ Personal needs

☒ Banking

☒ Employment

☐ Social needs

Adams, NY

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☒ No

Name:

John C Rogers

Address:

P.O. Box 75 Ellensburg, NY 13636

Telephone:

Date:

4-23-2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☒ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☒ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping



Personal needs



Banking



Employment



Social needs

5. Do you currently use local businesses in the community?



Yes

☐ No

If yes, would you continue to use them if the Post Office is discontinued?



Yes

☐ No

Name:

HUGH LAVERY

Address:

P.O. Box 32, ELISBURG, NY 13636

Telephone:

Date:

25 Apr 2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☒ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☒ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping



Personal needs



Banking



Employment



Social needs

5. Do you currently use local businesses in the community?



Yes



No

If yes, would you continue to use them if the Post Office is discontinued?



Yes



No

Name:

Gregory Lake

Address:

Box 110 Ellisburg NY 13636

Telephone:

315-778-2920

Date:

4/25/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> sometimes
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> sometimes
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping

Watertown



Personal needs

Adams Drug Store King's



Banking

Adams



Employment



Social needs

5. Do you currently use local businesses in the community?

There are none

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Our post office is the only thing in our town - I can walk to our post office.

Name:

Dorene Velez

Address:

Ellisburg, N.Y. 13636

Telephone:

Date:

4/25/2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

Do NOT close IT!!
We need Ellisburg
Post Office!!!



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐ Shopping

☐ Personal needs

☐ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Address:

Telephone:

Date:

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO

- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☐ Personal needs

☒ Banking

☒ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☒ No

Name:

BEN COBB

Address:

PO Box 27, FLEISBURG, NY 13636

Telephone:

315-846-5895

Date:

4/25/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

Mail security better maintained ~~than~~
with PO Box than by rural delivery.

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping



Personal needs



Banking

Adams



Employment



Social needs

5. Do you currently use local businesses in the community?



Yes



No

If yes, would you continue to use them if the Post Office is discontinued?



Yes



No

Name:

Winford J Smith

Address:

PO Box 87

Telephone:

~~Ellisburg~~ 846-5935

Date:

4/25/2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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e. Pick up general delivery mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☒ YES ☐ NO

If yes, please explain:

DEALING w/ ACCESS - CURBS, DOORS, ETC.

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:

NO P.O.'S ALONG ROUTE I USE



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☒ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping SYRACUSE

☒ Personal needs SYRACUSE

☒ Banking N. SYRACUSE

☐ Employment LOCAL

☐ Social needs LOCAL

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: DAVID FLURLEY

Address: P.O. Bx. 7 Ellisburg, N.Y.

Telephone: 315 846 5650

Date: Apr. 26 2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

a. Entering permit mailings	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
b. Resetting/using postage meter	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

Nonpostal Services

a. Picking up government forms (such as tax forms)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
b. Using for school bus stop	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
c. Assisting senior citizens, persons with disabilities, etc.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

If yes, please explain:

d. Using public bulletin board	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
e. Other	<input type="checkbox"/> YES	<input type="checkbox"/> NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
------------------------------	--

If yes, please explain:

38



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Watertown

☒ Personal needs il

☒ Banking il

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: Roger Detweiler

Address: PO BOX 51

Telephone: 315-405-2206

Date: 4-25-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Sometimes
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain: Belleville - 2x3x per week



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☒ Better

☐ Just as Good

☒ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Adams, Watertown, Syracuse

☐ Personal needs

☒ Banking Adams, Watertown

☒ Employment ~~Ad~~ unemployed

☐ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name:

Phyllis Schenck

Address:

PO Box 77

Telephone:

315-846-5666

Date:

4/25/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

There are several Post Office Closes to each other, rather than Pierrepont Manor, Mansville & Ellisburg.

Pierrepont Manor is much smaller and should be closed before Ellisburg. Pierrepont Manor is closer to Mansville than Ellisburg.

Also Henderson 13650 & Henderson Harbor 13651, less than 3 miles apart could certainly share service, as Harbor residents are mainly seasonal.

Elacora & Sandy Creek are less or about a mile apart with very inconvenient hours, could be combined to expand on hours.

Although the postal service is not helpful or friendly, I don't see where closing a few offices is going to improve service. You can not get answers to simple questions. No one has any idea where lost mail goes and why it is ~~not~~ not returned to sender, at the return address. Services are paid for and not received and ~~so~~ no one seems to care. So closing a few will not make much difference to consumers.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☒ YES ☐ NO

If yes, please explain:

The only time we see other Ellisburg residents is at the Post office

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain: because I can walk to po. Piermont po has limited parking and attached to restaurant.

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

Watson

☒ Personal needs

Syracuse - Dr.

☒ Banking

Adams

☐ Employment

- Retired

☒ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

Ellisburg has 1 Post office and 1 Library plus 2 auto garage repair shops

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

because I used the library + auto repair shop

Name:

John + Patricia Deveau

Address:

11742 S. Main St, Ellisburg, NY 13636

Telephone:

178-1359

Date:

4/27/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

Additions to "Summary of Post Office Change Regulations

We get Monetary checks in the mail, I do not feel comfortable having them delivered to a box in front of the house...our street is very busy with thru traffic and in the fishing season, numerous fishermen walk by the house. If RR delivery what happens to boxes or mail that is too big to fit into box, does it get put on the ground in the mud and snow. Also we are senior citizens with limited income and with the gas prices going up so fast this extra financial expense of driving to the PO every day would put an additional burden on us. There are numerous senior citizens here in the village of Ellisburg.

Pierrpont Manor is too far from us to walk to it. Then there is the restaurant right next to the Post Office and I have been to the restaurant at lunch time and the parking is very limited between the two.

We never drive over to route 11 thru Pierrepont Manor when we go to either Watertown or Syracuse.

We would really hate to see them close the Ellisburg Post Office. It would be better for all if the Pierrpont PO was moved to Ellisburg as we have a large parking area and the inside of the building is bigger also.

John and Pat DeVeau
11742 S. Main St
Ellisburg, NY 13636

Handwritten signature of John and Pat DeVeau in cursive script.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☒ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☒ YES ☐ NO

If yes, please explain:

picking up their mail

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

- ☒ Shopping Adams, NY, Sandy Creek, NY
- ☒ Personal needs Adams, NY, Sandy Creek, NY
- ☒ Banking Adams, NY
- ☐ Employment Retired
- ☒ Social needs Adams + etc

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: Carolyn Tower

Address: PO Box 12, Ellisburg, NY 13436

Telephone: 315-846-5443

Date: 4/27/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Watertown, Adams

☒ Personal needs Watertown Adams

☒ Banking Adams

☒ Employment Watertown

☒ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: Richard & Linda Broadhurst

Address: 12389 Nys Rt. 193 Ellisburg, N.Y. 13636

Telephone: _____

Date: 4-25-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

my post office is the closest to me & would love for it to stay!!



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☒ YES ☐ NO

If yes, please explain:

160 1/2 mother

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better ☐ Just as Good ☐ No Opinion ☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Adams & Watkinson
☒ Personal needs Adams
☒ Banking Adams
☒ Employment self employed dairy farmer
☒ Social needs Elkburg Belleville

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name:

John & Pat Eastman

Address:

10798 N45 RT193 Elkburg N.J. 13636

Telephone:

315-846-5169

Date:

4-27-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☒ Personal needs

☒ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Debbie Payne, Town of Ellisburg Clerk

Address:

11574 S. Main, PO Box 113, Ellisburg

Telephone:

315-846-5138 opt. 1

Date:

4/27/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO

- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping

J/R / Webster / Oswego



Personal needs



Banking

Adams



Employment

Adams



Social needs

anywhere but here

5. Do you currently use local businesses in the community?

☐ Yes

☒ No

There are none!

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes

☐ No

Name:

J. Davis

Address:

Box 60 E'burg NY 13636

Telephone:

315-846-5954

Date:

4/27/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

E'burg p.o. is convenient, has more than adequate parking compared to Millie the branch & has a library next door. It also has more than enough space to remodel & accommodate the area that comprises the Southern end of the county.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board

☒ YES ☐ NO

- e. Other

☒ YES ☐ NO

If yes, please explain:

Socialization

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

We have a business that has had PO Box 85 for 35 years. Our Business is in Ellisburg. We want to continue with the same Address. NO Address Change. - Please!

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐

Shopping

☐

Personal needs

☐

Banking

☐

Employment

☐

Social needs

5. Do you currently use local businesses in the community?



Yes

☐

No

If yes, would you continue to use them if the Post Office is discontinued?



Yes

☐

No

Name:

Joseph & Marianne Hart - Hart Woodworks

Address:

PO Box 85 Ellisburg NY 13636

Telephone:

315 - 846-5689

Date:

April 30, 2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> OCCAS
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> OCCAS.
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> OCCAS.

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO *Have done this*
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO

- e. Other ☒ YES ☐ NO

If yes, please explain: *It is a place to meet and greet our neighbours and check on them.*

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better ☐ Just as Good ☐ No Opinion ☒ Worse

If yes, please explain: I prefer our present service - we had a mailbox in the past and the snow plows demolished it + knocked it down several times even when the whole yard was empty of snow. Mail never is the same time.

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?
- | | | |
|-------------------------------------|----------------|---------------|
| <input checked="" type="checkbox"/> | Shopping | Watertown, NY |
| <input checked="" type="checkbox"/> | Personal needs | " |
| <input checked="" type="checkbox"/> | Banking | Adams |
| <input checked="" type="checkbox"/> | Employment | Adams |
| <input checked="" type="checkbox"/> | Social needs | Ellisburg |

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: Lou Ann Gleason

Michael Gleason

Address: 4641 NYS Rte 289

Telephone: 315 8465595

Date: 4/29/11

Town of Ellisburg Court House
Town of Ellisburg Town Barn
Village Office
Post office
Ellisburg Library
Church
Auto Garage

all are in the village of Ellisburg
It makes sense to keep the post office.

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☒ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☒ Personal needs

☒ Banking

☐ Employment

☒ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: Karen M. Bertram

Address: Po Box 24 Ellisburg

Telephone: 315 - 387 - 2924

Date: 4/29/2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

We will switch to rural delivery vs. having a Po Box in Pierrepont Manor.
We don't receive much mail + have decided that we will change to save the expense.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

- ☒ Shopping Adams, Watertown
- ☒ Personal needs Adams, Watertown
- ☒ Banking Adams, Watertown
- ☒ Employment Adams, Watertown
- ☒ Social needs Adams, Watertown

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: H.G. Dale Clark

Address: 12551 St. Rt. 193 Ellisburg, N.Y. 13636

Telephone: (315) 846-5276

Date: 4-2-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☐ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☐ NO
- b. Using for school bus stop ☐ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse *Worse*

If yes, please explain:

Why waste a perfectly good new Building

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒

Shopping

☒

Personal needs

☒

Banking

☒

Employment

☐

Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name:

Ellibury Fire Corp

Address:

Telephone:

Date:

4/29/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Watertown

☒ Personal needs Adams

☒ Banking Adams Center

☒ Employment Belleville

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: Richard L Gordinier

Address: P.O. Box 22 Ellisburg NY 13636

Telephone: 315-846-9250

Date: 4-28-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- | | | |
|----------------------------------|------------------------------|--|
| a. Entering permit mailings | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| b. Resetting/using postage meter | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |

Nonpostal Services

- | | | |
|---|------------------------------|--|
| a. Picking up government forms (such as tax forms) | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| b. Using for school bus stop | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| c. Assisting senior citizens, persons with disabilities, etc. | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |

If yes, please explain:

- | | | |
|--------------------------------|------------------------------|--|
| d. Using public bulletin board | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| e. Other | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

Have changed address with work, any company that currently has our mailing address.

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

Watertown, Syracuse

☒ Personal needs

Watertown, Syracuse

☒ Banking

Sandy Creek

☒ Employment

Watertown / Sandy Creek

☒ Social needs

Sandy Creek

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Jesse & Megan Pratt

Address:

4540 Main St. Ellishburg NY 13636 P.O. Box 54

Telephone:

(315) 212-6252

Date:

4/28/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

Rural delivery would be fine however driving to Pierrepont Manor or Hannsville would be an inconvenience.

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping

Watertown, Adams



Personal needs

" "



Banking

Watn., Adams



Employment

Sandy Creek



Social needs

Watn., Syracuse Adams

5. Do you currently use local businesses in the community?



Yes



No

If yes, would you continue to use them if the Post Office is discontinued?



Yes



No

Name:

Lisa D. Bauer

Address:

PO Box 134 Ellisburg NY 13636

Telephone:

315-846-5839

Date:

5/1/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- | | | |
|----------------------------------|------------------------------|--|
| a. Entering permit mailings | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| b. Resetting/using postage meter | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |

Nonpostal Services

- | | | |
|---|------------------------------|--|
| a. Picking up government forms (such as tax forms) | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| b. Using for school bus stop | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| c. Assisting senior citizens, persons with disabilities, etc. | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |

If yes, please explain:

- | | | |
|--------------------------------|------------------------------|--|
| d. Using public bulletin board | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |
| e. Other | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO |

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐ Shopping

☐ Personal needs

☐ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Address:

Telephone:

Date:

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☒ Personal needs

☒ Banking

☒ Employment

☒ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☒ No

Name: Rebecca Worthington

Address: PO Box 184, Ellisburg, NY 13636

Telephone:

Date: 4/28/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☐ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☐ NO

- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain: We are a Corporation that does Daily Billing, and Large monthly Billing. We also receive payments daily.

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐ Shopping

☐ Personal needs

☐ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: John Allen Sanitation Service INC

Address: 11692 NYS Rt. 193, P.O. Box 34, Ellisburg NJ 13636

Telephone: 315-846-5951

Date: 5-2-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☒ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☐ Personal needs

☐ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Address:

Telephone:

Date:

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO

- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:

BELLEVILLE



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☒ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain: NO NEED TO DRIVE TO POST OFFICE DAILY - SAVES GAS

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping WATERTOWN OR PULASKI

☐ Personal needs

☒ Banking PULASKI

☐ Employment

☒ Social needs ADAMS

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: JAMES AND SHEILA BENGE

Address: PO BOX 98 ELLISBURG NY

Telephone: 955-6263

Date: 4/26/2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better ☐ Just as Good ☒ No Opinion ☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Watertown or Adams
☐ Personal needs
☐ Banking Adams
☐ Employment
☐ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name: Lucille Mc Nett

Address: 12202 NYS Rt 193 Ellisburg N.Y. 13636

Telephone: 315-846-5572

Date: 5-3-2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☒ YES ☐ NO

If yes, please explain:

The old people often sit wait visit to get mail

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain: Plow knocks down the mailbox also wind so loss of mail a big concern

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping

Adams Watertown



Personal needs

" "



Banking

" "



Employment

" "



Social needs

Both here " and local

5. Do you currently use local businesses in the community?



Yes



No

If yes, would you continue to use them if the Post Office is discontinued?



Yes



No

Name:

Lee-Mosier, J.

Address:

P O Box 21

Telephone:

Date:

30 April 2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

I think the old people need this the most.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO

- e. Other ☒ YES ☐ NO

If yes, please explain:

job employment

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☐ Personal needs

☒ Banking

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Albert / Susan Gehrke

Address:

P.O. Box 108

Telephone:

315 846-5637

Date:

April 25, 2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

We truly do ~~not~~ want this office to close. We hope it can be made possible to leave this service to us intact.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO

- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☒ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☒ Personal needs

☒ Banking

☐ Employment

☒ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name:

James N. Richmond

Address:

11708 St. Rt 193

Telephone:

315-846-5001

Date:

5-5-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☒ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping



Personal needs



Banking



Employment



Social needs

5. Do you currently use local businesses in the community?



Yes



No

If yes, would you continue to use them if the Post Office is discontinued?



Yes



No

Name:

Michael Maloney

Address:

4714 NYS Rt 289, Ellisburg

Telephone:

846-5405

Date:

5-4-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☐ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☐ NO
- b. Using for school bus stop ☐ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping Adams

☐ Personal needs

☒ Banking Adams

☐ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: Eleanor Stacy

Address: P.O. Box 93, Ellensburg, Wyo. 83636-0093

Telephone: _____

Date: May 4, 2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.

I feel that the Postal Service is a necessary business. I also feel our post office is very convenient and I feel it's a privilege to have ours here in our town. I also believe the Postal Service makes a profit that is sufficient. If we can't have our own P.O. — stop raising our rates!



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☐ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☐ NO
- b. Using for school bus stop ☐ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☐ NO

- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☐ NO

If yes, please explain:

I think you should serve Pierrepont Manor from Ellisburg rather than vice versa.



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

<input checked="" type="checkbox"/>	Shopping	<u>Adams</u>
<input checked="" type="checkbox"/>	Personal needs	<u>Various</u>
<input checked="" type="checkbox"/>	Banking	<u>Adams</u>
<input checked="" type="checkbox"/>	Employment	<u>Adams</u>
<input checked="" type="checkbox"/>	Social needs	<u>Various</u>

5. Do you currently use local businesses in the community?

☐ Yes ☒ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Sally W. Stevens

Address:

PO Box 102, Ellisburg NY 13636

Telephone:

315-846-5075

Date:

5/3/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better ☐ Just as Good ☐ No Opinion ☒ Worse

If yes, please explain: I use only money orders to pay my bills. this would mean I would have to go out of my way to send out bills

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

<input checked="" type="checkbox"/>	Shopping	<u>Watertown</u>
<input checked="" type="checkbox"/>	Personal needs	<u>Adams</u>
<input checked="" type="checkbox"/>	Banking	<u>Adams</u>
<input checked="" type="checkbox"/>	Employment	<u>Adams Center</u>
<input type="checkbox"/>	Social needs	

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: Cyndi Purdy

Address: PO Box 3 Ellisburg 13634 11734 S. main st

Telephone: 315-719-4168

Date: 5-3-11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:

I work at Belleville Henderson School there is a
Post Office next to the school.



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☐ Personal needs

☒ Banking

☒ Employment

☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name:

Michelle Morales

Address:

P.O. Box 126 Ellisburg NY 13636

Telephone:

315 846-9040

Date:

May 4, 2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Pick up general delivery mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☒ YES ☐ NO

If yes, please explain:

Senior citizen over 90

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

<input checked="" type="checkbox"/>	Shopping	Adams - Watertown
<input checked="" type="checkbox"/>	Personal needs	" "
<input checked="" type="checkbox"/>	Banking	" "
<input type="checkbox"/>	Employment	
<input type="checkbox"/>	Social needs	

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☒ No

Name:

Alice B. Eastman (by Pat Eastman daughter-in-law)

Address:

10691 NYS 193 / Ellisburg, NY 13636

Telephone:

(315) 846-5369

Date:

5/2/2011

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☒ YES ☐ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☒ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☐ NO

If yes, please explain:



- If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☒ Shopping

☒ Personal needs

☒ Banking

☒ Employment

☒ Social needs

5. Do you currently use local businesses in the community?

☒ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☒ Yes ☐ No

Name:

Heather RMTuett

Address:

P.O. Box 78 11778 S. Main Str. Ellisburg NY 13636

Telephone:

Date:

5/4/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☒ NO
- b. Resetting/using postage meter ☐ YES ☒ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☒ NO
- b. Using for school bus stop ☐ YES ☒ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☒ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☒ NO
- e. Other ☐ YES ☒ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☐ YES ☒ NO

If yes, please explain:



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better

☐ Just as Good

☐ No Opinion

☒ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?



Shopping



Personal needs



Banking



Employment



Social needs

5. Do you currently use local businesses in the community?



Yes



No

none available

If yes, would you continue to use them if the Post Office is discontinued?



Yes



No

Name:

Patricia E. Greco

Address:

11801 S. Main St. Ellisburg, NY 13636

Telephone:

(315) 846-5568

Date:

5/3/11

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.



Postal Service Customer Questionnaire

1. Please check the appropriate box to indicate whether you use the ELLISBURG Post Office for each of the following:

Postal Services

	Daily	Weekly	Monthly	Never
a. Buying Stamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Mailing Letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mailing Parcels	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Pick up Post Office box mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pick up general delivery mail	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Buying money orders	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Obtaining special services, including Certified Mail, Registered Mail, Insured Mail, Delivery Confirmation, or Signature Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Sending Express Mail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Buying stamp-collecting material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Other Postal Services

- a. Entering permit mailings ☐ YES ☐ NO
- b. Resetting/using postage meter ☐ YES ☐ NO

Nonpostal Services

- a. Picking up government forms (such as tax forms) ☐ YES ☐ NO
- b. Using for school bus stop ☐ YES ☐ NO
- c. Assisting senior citizens, persons with disabilities, etc. ☐ YES ☐ NO

If yes, please explain:

- d. Using public bulletin board ☐ YES ☐ NO
- e. Other ☐ YES ☐ NO

If yes, please explain:

2. Do you pass another Post Office during business hours while traveling to or from work, or shopping, or for personal needs?

☒ YES ☐ NO

If yes, please explain:

Not on a regular basis. Retired



3. If you have carrier delivery, there will be no change to your delivery service — proceed to question 4. If you currently receive Post Office box service or general delivery service, complete this section. How will the proposed service compare to current service?

☐ Better ☐ Just as Good ☐ No Opinion ☐ Worse

If yes, please explain:

4. For which of the following do you leave your community? (Check all that apply.) Where do you go to obtain these services?

☐ Shopping
☐ Personal needs
☐ Banking
☐ Employment
☐ Social needs

5. Do you currently use local businesses in the community?

☐ Yes ☐ No

If yes, would you continue to use them if the Post Office is discontinued?

☐ Yes ☐ No

Name: _____

Address: _____

Telephone: _____

Date: _____

Please add any additional comments on a separate piece of paper and attach it to this form. Thank you for taking the time to complete this questionnaire.